

OB APPOINTMENT TRACKER



DOCTOR NAME / MIDWIFE

DATE/TIME

ADDRESS/PHONE

QUESTIONS/CONCERNS:

To Do:

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DAILY PREGNANCY JOURNAL

Date: _____

Week of Pregnancy: _____

Weight _____

Measurements: _____

Prenatals: ☐

How I'm Feeling Today:

☐

Good

☐

Okay

☐

Rough

Symptoms I've Noticed:

Cravings/Food Aversions:

Movement Check (3rd trimester):

☐

Kicks

☐

Hiccups

My Activity Today:

Sleep Patterns:

Note to Baby: *Dear Little One.....*



HOSPITAL BAG ESSENTIALS FOR FIRST-TIME MOMS



For Mama



- ☐ ID, insurance card, birth plan
- ☐ Comfy gown/robe (something with easy access)
- ☐ Going-home outfit that is loose and comfortable
- ☐ Toiletries (toothbrush, face wipes, ponytail holders, chapstick, shampoo)
- ☐ Long phone charger, any device charger you bring
- ☐ Eye mask and earplugs
- ☐ Water bottle
- ☐ Eyeglasses, not contacts
- ☐ Nursing bra + pads / Breastfeeding or bottle-feeding essentials:
- ☐ Formula Tablet, book, music player with earphones
- ☐ Pregnancy pillow, your pillow, soft blanket, slippers or flip flops



For Baby

- ☐ Installed car seat
- ☐ Going-home outfit and blanket
- ☐ Diapers & wipes (hospital provides some)

For Your Partner



- ☐ Snacks that don't need refrigeration & water bottle
- ☐ Comfortable Clothing, pajamas and slip on shoes, swim trunks
- ☐ Phone and charger
- ☐ Camera or tripod
- ☐ Tablet, book, music player with earphones
- ☐ Toiletry Bag: toothbrush, toothpaste, hair care